

9/912,214

PATENT APPLICATION FEE DETERMINATION RECORD					Application or Docket Number	
Effective October 1, 2000					G514016PP	
CLAIMS AS FILED - PART I					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)				
TOTAL CLAIMS	32			RATE	FEE	
FOR	NUMBER FILED	NUMBER EXTRA		BASIC FEE	355.00	
TOTAL CHARGEABLE CLAIMS	32 minus 20 =	12		X\$ 9 =		
INDEPENDENT CLAIMS	2 minus 3 =			X40 =		
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>			
If the difference in column 1 is less than zero, enter "0" in column 2.			TOTAL			
CLAIMS AS AMENDED - PART II					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)		
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	32	Minus	32		
	Independent	2	Minus	3		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	0	Minus	32		
	Independent	2	Minus	3		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	0	Minus	32		
	Independent	2	Minus	3		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	
BEST AVAILABLE COPY					SMALL ENTITY TYPE <input type="checkbox"/> OR OTHER THAN SMALL ENTITY	
(Column 1)		(Column 2)		(Column 3)		
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	0	Minus	32		
	Independent	2	Minus	3		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	0	Minus	32		
	Independent	2	Minus	3		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		
	Total	0	Minus	32		
	Independent	2	Minus	3		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				<input type="checkbox"/>	
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.						
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."						
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."						
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.						

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